

Staple Issue Slip Here

POSITION	ID NO.	DATE
CLASSIFIER		
EXAMINER	800	10-18-97
TYPIST	A	10-22-97
VERIFIER		
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

BEST AVAILABLE COPY

INDEX OF CLAIMS

Claim	Date
Final	Original
1	11-11-97
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3	11-11-97
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14	11-11-97
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SYMBOLS

- ✓ ..... Rejected
- ..... Allowed
- (Through numeral) Canceled
- + ..... Restricted
- N ..... Non-elected
- I ..... Interference
- A ..... Appeal
- O ..... Objected

Claim	Date
Final	Original
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